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Substitute for form 1449A/PTO			Complete if Known			
				Application Number	UNKNOWN	10/643,453
INFORMATION DISCLOSURE STATEMENT BY APPLICANT  (use as many sheets as necessary)				Filing Date	HEREWITH	
				First Named Inventor	GREMEL	
				Art Unit	UNKNOWN	3762
				Examiner Name	UNKNOWN Hennesly	
Sheet	1	of	l	Attorney Docket Number	2971	U

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xaminer nitials	Cite No. <sup>1</sup>	Document Number  7 Number Kind Code (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear		
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		Office <sup>3</sup>	Number <sup>4</sup>	Kind <sup>s</sup> (if known)	MM-DD-YYYY	Applicant of Cited Document	Passages or Relevant Figures Appear	T®
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